

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-13-3.

Date: 10/23/10

Address: 5100 N. 7th St.

Case #: 14-40423

Delphi, IN

County: Carroll

46923

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☒ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☒ Vehicle
☐ Hotel/Motel
☐ Open -- No Structure
☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: Back seat
☒ Water Reactive Metal (Lithium): Back seat
☐ Anhydrous Ammonia: _____
☐ Hydrochloric Acid Gas Generator(s): _____
☐ Corrosive Acid: _____
☐ Corrosive Base: _____
☒ Other (item and location): Ether, Back seat

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☒ Other: Traffic Stop

This report is to be faxed to the following agencies that serve the location:

Fire Department: Delphi VFD

Fax: 765-564-2345

Health Department: NA

Fax: NA

Child Protection Service: NA

Fax: NA

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: B. RUSSELL

Phone 765-567-2125

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.